

Norton Health Law, P.C.  
525 Meade Ave.  
Charlottesville, VA 22902

## COMPLETE THIS SECTION ON DELIVERY

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

United States District Court  
Eastern District of VA  
701 E Broad St  
Richmond, VA 23219

9590 9402 5747 0003 5483 84



2. Article Number (Transfer from service label)

7019 1640 0000 2783 0891

PS Form 3811, July 2015 PSN 7530-02-00-9058

A. Signature	<input checked="" type="checkbox"/> Agent
	<input type="checkbox"/> Addressee
B. Received by (Printed Name)	<input type="checkbox"/> C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

1. Article Addressed to:	<input type="checkbox"/> Priority Mail Express®
	<input type="checkbox"/> Registered Mail
	<input type="checkbox"/> Registered Mail Restricted Delivery
	<input type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Signature Confirmation™
	<input type="checkbox"/> Restricted Delivery
2. Article Number (Transfer from service label)	<input type="checkbox"/> Adult Signature Restricted Delivery
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	<input type="checkbox"/> Collect on Delivery Restricted Delivery
	<input type="checkbox"/> Domestic Return Receipt

CERTIFIED MAIL



7019 1640 0000 2783 0891



1024



23219

U.S. POSTAGE PAID  
FCM LG B&W  
CHARLOTTESVILLE, VA  
22906  
DEC 01, 20  
AMOUNT  
**\$8.00**  
R2304E106625-50

RETURN RECEIPT  
REQUESTED  
U.S. MAIL  
MAILING & DELIVERY

United States District Court  
Eastern District of Virginia  
701 E Broad St  
Richmond, VA 23219

